

WELLFORD (B.R.)

AN ADDRESS

DELIVERED BEFORE

THE MEDICAL SOCIETY OF VIRGINIA,

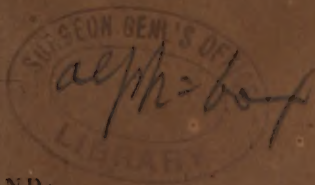
AT ITS

TWENTY-NINTH ANNUAL MEETING,

HELD IN RICHMOND, APRIL 1852.

BY BEVERLEY R. WELLFORD, M. D. ETC.  
PRESIDENT OF THE SOCIETY.

PUBLISHED BY ORDER OF THE SOCIETY



RICHMOND:

PRINTED BY RITCHIES & DUNNAVANT.

1852.



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## ADDRESS.

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GENTLEMEN,

The half of the nineteenth century which has just terminated is a remarkable era. Within that brief space in the world's history, events have occurred which will exert most momentous influences on the destinies of mankind throughout all coming time. Science and art and literature and enterprise have united in one common cause, and have directed their energies, their attainments and their efforts to elevate the position and to augment the comfort, prosperity and happiness of social life. The researches of bygone ages, which have been gradually approaching a truthful and perfect knowledge of the rationale of natural phenomena, appear in these our own times to have directed the results to the end and aim of all acquirement—a practical and useful application to the business and necessities of man. To this utilitarian tendency, emphatically the character of the present age, every art and every occupation is more or less indebted. In its onward course it has touched every employment of civilized life, and it has touched nothing which it has not improved. To it agriculture owes its cotton gin, its wheat machines, its sugar apparatus and its other various appliances which have diminished the labor while they have increased the products of human industry: commerce, its floating warehouses, which successfully stem the currents of the boldest streams, invading even the dominions of the proud Niagara itself, or bear, with a celerity and precision formerly unconceived, the treasures of the merchant to the uttermost parts of the sea. Machinery, so skillfully prepared as to appear in-

vested with intellect, so perfectly does it perform functions to which in former days the human mind and human hands were supposed to be alone competent, converts the contributions of the three great kingdoms of nature into every variety of fabric which is required to supply the wants or gratify the luxury of civilization and refinement. Steam, in the fearfulness of its power, has been made subservient to these and other purposes of equal utility, and curbed and controlled, like an impetuous charger, obeys the wishes and performs the duties required by his conqueror. In his bold and triumphant progress, the scientific utilitarian has dared to seize on the material of lightning itself, and devote its powers to the daily purposes of life. By its agency he transmits his thoughts from one end of this vast continent to the other, and annihilates both time and space by his knowledge of its properties, its powers and its laws. The dazzling beauty of a theory or the curious results of an experiment are no longer sufficient incentives to the scientific devotee; the *cui bono* is ever present in his mind, and until this, the impelling question of this matter-of-fact age is solved, all is regarded as "weary, stale, flat and unprofitable;" nor has the march of practical improvement been more remarkable in any other art or science than in that of medicine—a severe and accurate process of investigation and of reasoning has superseded the construction of ingenious theories, based on brilliant conceptions rather than on an accumulation of well ascertained facts. The imaginings of Brown and Cullen and Darwin and Rush and Broussais have withered beneath the stern process of inductive philosophy, and such of them as contained an alkaloid, have had it extracted, and the residuum has been cast "like a worthless weed away." The modern medical philosopher requires for his basis a solid substratum of fact, or he knows that, like the house built on the sand, the tempests of demonstration will destroy his superstructure. The doctrines of abstractions and subtle essences can no longer survive the disclosures of the knife and the microscope of the pathological anatomist, and the day has past when the medical world will tolerate speculations where



"nothing is, but what is not." Nor has the practical improvement of the age been limited to a more correct mode of reasoning. New methods of diagnosis and of treatment have been introduced, and the eye and the ear now disclose, with the certainty of perception, the condition of internal organs which was formerly surmised from vague and uncertain data. Practical chemistry too has come to the aid of practical medicine, and presented it with chloroform and the alkaloids, by which results are now accomplished, which, if predicted at the commencement of the present century, would have been scouted as the day dreams of a wild and undisciplined enthusiasm.

But whatever, gentlemen, may have been the progress of our science within the period to which we have alluded; whatever additional resources may have been placed in our hands, and however cheering may be the prospect before us of farther professional advancement, it must be apparent to the candid observer of medical events, that many and serious defects exist in our system, which must be corrected, if we would assume and maintain that position in the world-wide commonwealth of medicine, which philanthropy and professional patriotism alike urge us to attain. The practical utilitarianism of the age is perhaps not more clearly exemplified by any other incident, than by the fact that these defects are at this moment occupying the attention of many of the best and wisest members of the profession in the Union, who are devoting their energies to reform our system and to place American medicine on the same platform with that of the older and more mature nations of the other hemisphere. The interest which is felt on this subject has now assumed a tangible form, and the present occasion is itself evidence that the profession in our own state is alive to the necessity for action, and appreciates the importance of a systematic organization, if we would contribute our due proportion to the great enterprise of medical reform. To estimate correctly our real position, and to give a proper direction to our efforts, it is necessary that we contemplate calmly and impartially the actual condition of

medical politics, without permitting our self-love or spirit of self-laudation to deceive us, by exaggerating our excellencies or depreciating our errors. Let us then compare our standard with that of others, and if defective, let us not be appalled by apparent difficulties, nor underestimate our powers to cope with and subdue them. But if any valuable consequence is to result from our efforts, it can only be attained by united and systematic action. Unanimity, however desirable, is not to be anticipated. Local and individual interests will, in some instances, conflict, and direct the opinions and wishes of the interested parties; but in the large majority, higher and nobler impulses will prevail, and the claims of science and humanity will induce them to aid in an enterprise which, in accomplishing a work demanded alike by patriotism, philanthropy and the usefulness and dignity of our calling, will possess all the advantages of military organization and discipline over the irregular and inefficient action of guerilla warfare.

Considerations and influences such as these led to the formation of the American Medical Association, and to the revival and more expanded organization of the Virginia Medical Society. The American Medical Association has, at its several annual sessions, wisely and boldly investigated the condition of medicine in the United States, with a view to ascertain the causes which impede its progress, and to suggest the appropriate remedies. The present occasion may perhaps be most profitably employed in a hasty glance at its history and progress, in an examination of its action and of the best method of aiding its efforts.

So long ago as the year 1792, the justly celebrated Dr. Rush, one of the earliest and most zealous teachers of scientific medicine in this country, attracted the attention of the profession to the necessity of a high standard of preliminary education, and on various subsequent occasions urged the importance to a physician of an acquaintance with the various subjects embraced, not only in the limits of mere professional acquirement, but in the education of an accomplished and well informed gentleman. From that period to the present,



the most eminent men of the profession have advocated the same principles, and in frequent public addresses, have insisted on the necessity of improvement in this respect, not merely to prevent the deterioration of American medicine, but to advance its dignity and usefulness. All such monitions were, however, unconnected and isolated, and of course ineffectual, until it became so apparent that medicine, if not actually receding, was at least not, like its sister sciences, improving in conformity with the spirit of the age, that the New York State Medical Society in 1845 "earnestly recommended a national convention of delegates from medical societies and colleges in the whole Union to convene in the city of New York on the first Tuesday of May in the year 1846, for the purpose of adopting some concerted action." In obedience to this call, and at the time designated, about one hundred members assembled, comprising the most distinguished physicians of New York, and representatives from nineteen states of the Union. An effort was made to arrest further progress, but signally failed, receiving only two votes in its favor, and the convention proceeded unanimously to resolve—"That it is expedient for the medical profession of the United States to institute a National Medical Association, for the protection of their interests, for the maintenance of their honor and respectability, for the advancement of their knowledge, and the extension of their usefulness." Committees were appointed to report a plan of organization for such an association at a meeting to be held in Philadelphia in the ensuing spring, to prepare and issue an address inviting the co-operation of medical societies and chartered schools in the United States, and for other purposes connected with the objects avowed by the convention. Resolutions were also unanimously adopted, declaring it "desirable that a uniform and elevated standard of requirements for the degree of M. D. should be adopted by *all* the medical schools in the United States. That it is desirable that young men, before being received as students of medicine, should have acquired a suitable preliminary education, and that it is expedient that the medical profession in

the United States should be governed by the same code of medical ethics." Various other subjects of interest were presented to the convention, which were acted on or referred to committees, and the convention adjourned to meet in Philadelphia in May 1847.

At the appointed time, near two hundred and fifty delegates from schools and societies of twenty-three states, assembled in Philadelphia. A plan of organization was reported and adopted, which asserts that "an institution so conducted as to give frequent, united and emphatic expression to the views and aims of the medical profession in this country, must at all times have a beneficial influence, and supply more efficient means than have hitherto been available here, for cultivating and advancing medical knowledge, for elevating the standard of medical education, for promoting the usefulness, honor and interests of the medical profession, for enlightening and directing public opinion in regard to the duties, responsibilities and requirements of medical men, for exciting and encouraging emulation and concert of action in the profession, and for facilitating and fostering friendly intercourse between those who are engaged in it." This, gentlemen, is the announcement of the motives and intentions of the American Medical Association—these are its avowed principles and declared objects—it is for you to vindicate or repudiate them. Your present and future action will evince to what extent you sanction and will sustain them—to what extent you respect its labors and will promote its wishes. As a large and influential portion of the great medical community of the United States, your approbation and assistance are essential to the success of an institution intended to exalt and dignify a profession with which your prosperity and honor are intimately associated. At this meeting in Philadelphia, an elaborate and admirable code of medical ethics was reported and adopted, and able reports on the subjects of preliminary education and the standard of requirements for the degree of M. D. were presented and received with cordial approbation. The report on preliminary education advises the establishment of a uniform standard for

medical students, which shall be of such extent as will ensure both the knowledge and mental discipline necessary to those who would enter a profession full of labor and responsibility. It earnestly recommends every medical preceptor to exact this standard of every young man before he admits him as a pupil, and requests all the medical colleges of the country to require of each student, who applies for matriculation, a written certificate from his preceptor, that he possesses the preliminary qualifications required, specifying also the period of admission into his office.

On the subject of medical education, a brilliant report was presented by the accomplished chairman of the committee, Dr. R. W. Haxall of this city. It presents a fair, comprehensive and accurate view of the whole topic, and its facts and arguments are alike entitled to the highest consideration, and afford material for the grave reflection and action of all who love their profession and would promote its prosperity and usefulness. The resolutions which are attached as deductions from the facts set forth in the report, recommend to all the colleges an extension of the period employed in lecturing, from four to six months; an increase of the number of professors to seven; to require of their pupils the devotion of three years to the study of medicine before graduating; the attendance on two full courses of lectures; attention to dissections steadily for three months; and other reforms, both important and salutary. The report and resolutions were adopted, as expressive of the views and opinions of the convention, and still remain as the recorded judgment of the association. In 1848, at the meeting in Baltimore, these resolutions and those on preliminary education were reiterated, and their practical observance strongly recommended. In Boston, in 1849, the association again reiterated their approval, after discussion and reference of the subject to a special committee. In Cincinnati, in 1850, it was resolved "That the recommendations of this association at its former meetings, in regard to medical education, be reaffirmed, and that private preceptors be still urged to receive into their offices only those duly qualified by previous educa-



tion to engage in the study of medicine ; and at the same meeting the necessity of increasing the standard of preliminary and professional education required of those who would enter the medical profession is recognized, "for the purpose of encouraging and maintaining a national medical literature." Finally, at the meeting in Charleston in 1851, it was resolved, that the recommendations of the association at its former meetings in regard to education, both preliminary and medical, be reaffirmed, and that both the schools and private preceptors be still urged so to do their duty as to secure to the community a well educated profession. The report of this year was from the pen of Dr. Worthington Hooker of Connecticut, and was considered so remarkable for its ability, that the association recommended its republication by the several state medical societies, and its general distribution among the profession. In addition to its reurging, as before stated, the resolutions of Dr. Haxall in 1847, it asserts—that the abuses which exist in the modes of medical education pursued in this country demand the serious consideration of the profession ; that they should be freely discussed as an important means of effecting their removal ; that no effort can succeed that is not based on a reform in the public sentiment, both of the profession and the community ; that reform is to be effected mainly through professional organization, and that it is incumbent upon every physician to give it character and efficiency as far as it is in his power so to do ; that the association has confidence in efforts to reform the sentiments and practice of the community in relation to medicine and the medical profession, and that in the work of medical reform, while all precipitate movements should be avoided, we should aim at a steady advance from year to year, until a thorough system of education be established by the profession throughout the country. Let it be remembered, that such was the action of the American Medical Association at its meeting the last spring, and that the views expressed in the report, and condensed in the resolutions of Dr. Hooker, of which the above is an abstract, must be received as the recorded know-

ledge and opinions on the subject of medical education, as now existing, expressed by a large number of the physicians of this country, whose opinions are derived from observation and experience of evils existing in twenty-three states of this Union, and who must be presumed to be well qualified to arrive at just and correct conclusions.

The enquiries instituted by the American Medical Association appear then to have established the fact that the most influential impediments to the advance of our science in the United States are defects in our system of education, both preliminary and medical, and that such impediments have not only existed heretofore, but are even now operating to a calamitous extent. Nor is the evidence, that medical studies are usually commenced without sufficient previous education, derived only from members of the association. Information, obtained from private practitioners and teachers residing in every part of the Union, sustain its position on this subject. The report of the committee of 1847 states, that full and explicit answers from thirty-nine gentlemen representing twenty-one states of this Union, establishes the fact, not only that there is no standard of preparatory education exacted of medical students throughout the United States, but that there is no general rule adopted in any particular state or district. The whole subject is left to private instructors, to the students themselves or to their parents. The evil of this state of things is abundantly sustained by testimony derived from the schools, which are peculiarly qualified to appreciate every obstacle to the acquisition of the medical education. The dean of the faculty of Castleton Medical College informs Dr. Campbell Stewart, that above all other causes, the fact that little or no preparatory education is required of the student, induces many to enter the profession who are by no means qualified to do so, and keeps many out of it from the low standard of professional acquirement. The faculty of Jefferson Medical College presses on the attention of the committee the importance of a recommendation, emanating from the association, that its members should decline to receive, as private pupils, persons who do

not possess the preliminary education necessary to fit them for entering on the study of medicine ; and adds, that such a recommendation, strictly complied with, would arrest a serious evil at its inception, and save many young men from the mortification of finding, after the waste of much time, that they had mistaken their vocation. The last report on this subject, after alluding to "the deficient preliminary education of a large proportion of the medical students in this country," expresses the opinion that "the laxness of practice which prevails in regard to the preliminary training of medical students, is one of the greatest obstacles in the way of raising the standard of education and attainment in the profession."

If we compare this utter neglect of preliminary education in the United States with the requirements of Europe, we are driven to the admission that a knowledge of medicine demands as little mental culture for its acquisition as the simplest mechanical trade, or concede that the mass of European practitioners are more competent to the performance of their professional duties than those of the United States. Of course, I do not refer to the exceptions—I merely point to the rule. The Anglo Saxon mind especially, as developed amid the free institutions and magnificent scenery of our own country, has proved itself at least not inferior to that of any other people on the face of the globe ; and I defer to none in my admiration for the illustrious examples of distinguished medical merit which we now have among us, and have always had since the scientific cultivation of medicine originated within our borders. But, however vigorous and acute the intellect may be, without early and judicious cultivation, it is as powerless to comprehend the varied and recondite mysteries of science, as the most fertile soil would be to produce in perfection the fruits of the earth without the wisely directed labor of the agriculturist. In the United States alone has this subject failed to receive from the guardians of the public health the attention its importance demands. In Prussia, at the University of Berlin, every candidate for admission into the medical department must undergo a satisfactory preliminary examination on



Physics, Chemistry, Botany, Natural Sciences, the Classics, Mathematics, History, and the Rudiments of Philosophy, or else present certificates of acquirement in each of these branches from some recognized academy or university. In Austria the study of medicine must be premised by an attendance on the primary schools of four years, in the grammar schools of six years, and in the study of Greek, Latin, Mathematics, Astronomy, History and Modern Languages two years more. A certificate of proficiency in all these branches is also required. At the University of Munich, in Bavaria, the first two years are devoted to Logic, Metaphysics, Moral and Juridical Philosophy, Philology, History, Mathematics, Geography, Natural History, Ethnography, Physics, Organic Chemistry, Botany, Mineralogy and Zoology. A satisfactory examination at the end of two years gives admission to the courses of the medical faculty. In Italy, at the University of Pavia, students must produce certificates of acquirement in all the branches of elementary education, or undergo an examination on History, Latin and Greek Composition, Mathematics, Botany, General Chemistry, Mineralogy and Geology before they can matriculate. In Paris, before a young man can commence his medical studies, he must have graduated in the arts and sciences, excepting such as are taught in the medical course. In Russia, ample evidences of elementary education are invariably insisted on as prerequisites to admission into the medical classes. In the British army, a liberal education and a competent knowledge of the Greek and Latin languages are indispensably requisite in every candidate. In the British navy, previously to the admission of assistant surgeons, it is required that they produce proof of having received a preliminary classical education, and that they possess in particular a competent knowledge of Latin. Even in our own army, insufficient preparatory education is enumerated among the most striking causes of failure on the part of the candidates. They are examined on the branches usually taught in our medical schools, and also on their literary and scientific attainments, embracing a grammatical knowledge of the English language, Latin, and Natural

Philosophy, all of which are deemed important branches to those entering on the study of a liberal profession.

The remarkable discrepancy between the European and American plan with reference to preliminary education, must at once be apparent to the most superficial observer. It is obvious that both cannot be right; it is not impossible that both may be to a certain extent erroneous, because while it is not only desirable, but ought to be imperative, to demand from the applicant all that is necessary, it would on the other hand be oppressive and improper to require attainments, which, however ornamental and *distingué*, are not essential to the objects he purposes to achieve. The principle which should regulate action on this topic will be recognized by all who are familiar with the mental resources requisite for the successful prosecution of medical studies. The extent to which the principle must be carried in its practical application presents a difficulty which can only be solved by assigning such limits as while it maintains the dignity and utility of the profession and the safety of the public, shall not infringe the rights of the applicant, or create unnecessary and insuperable obstacles to the accomplishment of his wishes. Details based upon this position may be easily so arranged as to admit all who are at all qualified or prepared to enter on the study of medicine, while others, more fortunate in their circumstances, may avail themselves to any extent of the advantages of enlarged education, which they may be so happy as to possess. Conceding the propriety of these views, there will still be various opinions as to the minimum qualification which should be required; and more than that it would, under existing circumstances, be unwise to demand, because any attempt at sudden and violent infraction of accustomed usage would certainly be unsuccessful. Content, then, to dispense with intellectual luxuries, and to require only such necessities as are indispensable to the comfortable and successful progress of the student, we should at least expect him to have acquired a thorough English education and a competent knowledge of the Greek and Latin languages. Without the mental discipline and habits of

thought, the result of previous study, it is impossible to engage in the pursuit of professional knowledge with either pleasure or success, because every page which the student reads will require an acquaintance with his own language and with those from which it and the technical phraseology of medicine are mainly derived. In addressing an audience of medical men, it is unnecessary to dwell on this topic; it is to them a self-evident proposition; their own experience has taught them that the ordinary nomenclature of anatomy, *materia medica* and disease are incomprehensible and unintelligible, when ignorant of the languages in which they are expressed. I know, and have shewn, that the standard of preliminary education indicated is far, very far below that required in Europe; but I know too, that the European standard is beyond that which we can at present hope to attain. Let us, then, seek not what we would, but what we may achieve, and having set the ball in motion, wait with patience for it to arrive at its full momentum. But it may be asked, admitting the alleged defects in preliminary education actually to exist, How is the evil to be abated? Having ascertained the disease by correct diagnosis, What remedy is suggested to relieve it? The suggestion of the remedy is sufficiently easy—its exhibition may be somewhat more embarrassing, but while our powers as a body are limited, we may, nevertheless, as individuals, do much to effect an object so desirable. The student takes his first professional step in the office of the private practitioner. We may require from him evidence of the preliminary qualifications we think indispensable, and if he possess them not, refuse to receive him: an applicant for admission into the medical office will listen with respect and obedience to advice manifestly intended for his personal benefit. We may tell him kindly and respectfully, that a year or two spent in the acquisition of the necessary education will tend vastly more to his ultimate success than to employ the same time in futile attempts to acquire knowledge for the reception of which he is not suitably prepared; that without it he cannot progress, and that the attempt



to acquire it as he proceeds will cost him more time than to devote his attention exclusively to its attainment, and that he will thus expedite instead of retarding the accomplishment of his ultimate object. He will, in most instances, listen to the counsels of experience with deference and acquiescence, but if he will not, let him be firmly and decisively rejected. Another remedy, adopted by the Medical Society of the State of New York, consists in the establishment, by state and local societies, of primary boards of examiners, whose certificates shall always be required prior to the reception of students into the offices of practitioners or teachers. When we shall have succeeded, as I trust we shall, in extending the influence of this our parent society over the broad limits of our state, so as to cause the organization of one or more local societies in every county, this plan of the New York society may doubtless be adopted by us with efficiency and success.

But, however imperfect the preliminary education of the medical student, it cannot well be more superficial than his subsequent medical course. Nor is this remark intended to be in any degree disrespectful to the schools. It is incident to the system, for which individual institutions are not responsible, and we remark now, as we shall perhaps hereafter demonstrate, that no effort, however decided and intelligent—on the part of one or more isolated schools, can remedy the existing evils. That remedy is in other hands: meritorious schools, which are honestly endeavoring to elevate the standard for the degree, may aid in its application; but unassisted by other influences, they are impotent to accomplish the objects which every right minded member of our profession so ardently desires. But even at the hazard of being misunderstood by those whom we so much admire and respect, and whose good feelings and opinions we covet, and would cherish by every honorable effort, we must deal honestly with ourselves and with the interest and welfare of the profession we love, by admitting, however reluctantly, the truth and justice of the conclusions of the American Medical Association on the subject of medical education as conducted in this country.

Lest, however, any of us be seduced, by self-love or national vanity, to dissent from those conclusions, and to contend that the American educatee enjoys equal opportunities of instruction, and is subjected to tests of qualification, before he is permitted to practise, as severe as those instituted in other countries, let us refer to the actual condition of medical education in the United States, and compare it with that of the other hemisphere.

What, then, is the course too frequently pursued by medical students in this country, without let or hindrance either by legislative or scholastic interference? He enters the office of his preceptor, as I have already shewn, and as we all know to be the fact, without any enquiry into his previous education. If he has been so fortunate as to have received instruction in the ordinary branches of an English education, and to have acquired a knowledge of ancient languages, it is well; but if he has not, it is not demanded as a prerequisite, any more than if he were about to attempt to learn any ordinary mechanical trade. He reads, or professes to read, medical works in his preceptor's office for about eight months—a few months more or less, as the case may be. During this period he learns something of *materia medica* and pharmacy by preparing medicine for the daily prescriptions of his preceptor; but even this is an advantage not always enjoyed, and in the large cities of the Union, never. He is advised what books he should read, and they are furnished him, and such explanations are given him as he may from time to time require; but beyond this he receives little instruction, and is left to his text books and his Medical Lexicon to get along as well as he can. If it so happen that he is industrious and ardent in his pursuit of knowledge, he is generally found in the office engaged in study; but if otherwise, various seductions are ever ready to induce neglect of office hours, and he consoles himself with the expectation that the lectures of the ensuing winter will retrieve all loss of time and give him the requisite information, without the self-denial demanded by solitary and laborious study. The winter approaches, the lectures com-

mence, and perhaps for the first time he enters the precincts of a splendid and attractive city, with an acute sensibility for its excitements and its pleasures. He purchases the tickets which will admit him to the lecture rooms of his professors, but whether he avails himself or not of the privilege they are intended to confer is an affair regulated exclusively by his own inclinations. Perhaps he is attracted by the eloquence and ability of one or more of the professors, votes the others humbugs, and either absents himself from their class rooms or amuses himself while there in some of the various modes which the proverbial wit and mischief of medical students so readily concoct. No test of his attendance or his progress is demanded, no faithful nor rigid study is exacted, no examinations are instituted, no recitations required. He may dissect if he choose to do so, but if he does not he may let it alone, as in many of the schools a knowledge of anatomy thus acquired is not made necessary to obtain a degree. Nor is clinical instruction made obligatory—some of the colleges have no hospital under their control, others substitute a weekly clinique, and others disregard the subject altogether.

But if a practical knowledge of anatomy and clinical information are not conditions precedent to the honors of the doctorate, attendance on two courses of lectures is—or rather the possession of two sets of tickets; for if a *soi disant* student is so inclined, he need not actually attend lectures at all, because no evidence whatever is required that he has done so, but the possession of his tickets entitles him to claim his examination for a degree at the close of the second course of four months' lectures as a matter of right. Accordingly, at the termination of his first course of lectures, he returns to his preceptor's office, where he spends his summer pretty much as he had the preceding, attends the next winter on the lectures *ut antea*, is examined the next spring, obtains his diploma, and his medical education is complete. I appeal to every physician now present to say whether this is not a correct statement of the progress of many medical students, from the commencement of their pupilage to its close. Of course,



I do not wish to be understood to intimate that it is generally so, or that it is even a *very* frequent occurrence; but that it is a veracious history of many cases, and that there is nothing in our present system to prevent examples of this sort, will, I presume, be readily admitted. But it may be said, that while the student has it in his power to be as regardless as he pleases of the opportunities of instruction afforded him, the development comes with his examination, which exposes his negligence, and his rejection ensues as a necessary consequence. Such would doubtless be the fact if a single examination be a sufficient test of qualification, and that examination be so conducted as to fulfill its intended function; but whatever be the cause, the fact is unquestionable, that entire incompetency is not always a bar to the attainment of the diploma. Of this fact, if it were not one of common notoriety, the records of the army and navy boards afford conclusive evidence. We are informed by two naval surgeons of eminence, in a communication to the American Medical Association in 1848, that in an examination "before a recent board, one gentleman defined a lotion to be a 'kind of application,' and an evaporating lotion, 'one that does not evaporate.' Another confessed his ignorance of the freezing and boiling points of water, and contended that knowledge on such points was useless. One candidate determined castor oil to be the 'oil of castor—an animal.' Another located the solar plexus in the sole of the foot. *All these were graduates.*" The most ardent advocate for the American system of medical education will scarcely contend for the perfection or even sufficiency of any system which would invest with diplomatic honors examples such as these. Let it moreover be recollected that in this country the diploma is something more than a mere collegiate honor. In most of the countries of Europe it is nothing more—it confers no license to practise, and does not place in the hands of the recipient either the lives of his fellow-citizens or the reputation of the profession. Here it is, not legally, because in most of the states the law demands no license, but it is practically the license to practise medicine, because it is

the certificate of men believed to be both competent and honest, that the possessor of the parchment is "*in artis medicæ scientia plenius instructum*," and it is therefore a passport to public confidence, and confers a title to respect which is withheld from the practitioner who does not possess it. Such being the fact, the conferring the degree involves a double responsibility—a responsibility which there is much reason to believe is not always properly appreciated.

"They order these things better in France," and indeed in every other region which we profess to rival in all that relates to science, art, civilization and refinement. In the Paris School of Medicine there are eighteen distinct chairs: twenty-six professors, aided by a number of assistants. Four years' study are required of the candidate, who has to undergo five examinations, besides those on French, Greek, Latin, History and Geography. He must be a bachelor of sciences, for which he is examined on Mathematics, Chemistry, Zoology, Botany, Physics and Mineralogy. In the University of Edinburgh four years' study are necessary, at least six months of each of which must have been passed in the Edinburgh or other University authorized to confer the degree of M. D. Thirteen branches are taught by thirteen professors. If the student is absent from the lecture more than a limited number of times the course counts as nothing, and must be followed again. In the University of Berlin, there are 28 professors and 39 assistants. A candidate cannot be examined for a degree until after four years' attendance on lectures—from four to six are usually required. Besides the preliminary examination prior to matriculation, three others are required by law before a degree can be obtained. These examinations are exceedingly severe, and the degree, after all, confers no right to practise. The University of Munich in Bavaria requires seven years of study: two preliminary, and an examination; three didactic medicine and an examination; two in practice. A public lecture is also required, two hours' defence of a thesis written and published in Latin or German, and an inaugural dissertation. These are the terms on which

a diploma and right to practise are granted in Bavaria. In Italy, the University of Pavia has 21 professors and 21 assistant professors appointed by concours. The candidate must pass five examinations—one every year for four years, and then the fifth, which is extremely strict and practical. He publishes a thesis and defends it in public, after which he receives a degree which confers no right to practise. In Russia, the regulations, courses of study, &c. are the same as in Berlin, and the examinations are very strict. Heavy penalties are imposed on all who practise without a license.

Notwithstanding the severity of the ordeal through which a student must pass before he obtains his diploma, it is in many countries of the Eastern hemisphere a mere collegiate honor: it conveys no authority to practise. Before a license is granted for this purpose, other evidence of competency must be afforded. This rule is not uniform, but obtains in many of the countries to which reference has been made. In Great Britain, the M. D. degrees of universities and licenses from royal colleges entitle to practise, except in London and within seven miles thereof. This privilege is only conferred by the Royal College of Physicians, and to obtain it the candidate is required to undergo an examination before the president and censors on Latin and Greek, and likewise three medical examinations, which are conducted in the Latin language. In France, no person is permitted to practise without regular license according to law. Regular graduates, holding diplomas of M. D., may practise anywhere in France. Unauthorized persons engaging in the practice of medicine, surgery or midwifery, are liable to fine and imprisonment. In Germany, the diploma conveys no right to practise, except in Austria, and there only to graduates of the Universities of Vienna, Pavia or Padua. This privilege is accorded, because the examination for the degree is conducted by duly selected general practitioners, equal in number to that of the faculty of the university, and who vote with the faculty upon the reception or rejection of the candidate. In Prussia and most of the other German states, a candidate for license is compelled to exhibit



a regular series of diplomas and certificates, shewing the course of academic study he has pursued, his morality, proficiency in general science, and also a diploma of M. D. He is then subjected to five examinations conducted by sixteen physicians appointed by government, and called state examiners. These examinations are minute and searching to an extreme, each occupying about two weeks, except the last; embracing oral examinations, theses publicly defended, extemporary lectures, operations, clinical practice and written descriptions of cases and treatment, without being allowed reference to books or other assistance, selection of medicines by their physical properties, minimum and maximum doses of twenty medicines, and the writing out in full of five formulæ for the apothecary. Unless the examinations on surgery are reported *excellent*, he is specially prohibited from using the knife or performing surgical operations. The number of candidates for license is about 220 to 250 annually, and of these nearly twenty per cent. are rejected. In Switzerland, an applicant must, whether graduate or licentiate, obtain a permit from the government, which exacts a rigorous practical examination. The population is about 2,150,000, and the whole number of graduated physicians at the period of the last census was 450. In Italy, a license from government is required, and in Russia the heaviest penalties are inflicted upon all who engage in practice without authority to do so, obtained either through the royal academies or directly from the emperor.

In the United States we are more tolerant. If principle may be inferred from practice, we consider the *savans* of the other hemisphere a party of old fogies, who are behind the spirit of the age, deluded by the antiquated notion that long years of laborious study are necessary to master the subject of medicine and its ancillary sciences, and that critical and rigid examinations are necessary tests to ascertain whether those years have been honestly devoted. In young America we patronize the railway of mind as well as of locomotion, and our sons, like Minerva from the brain of Jupiter, spring at once into being, matured in power and in wisdom. Few

of the states, therefore, require either diploma or license. In our own state, in ancient enlightened Virginia, qualification for the practice of medicine is tested by the ability to pay ten dollars. If the candidate cannot pass the examination of the sheriff on this branch of science he is rejected; but if he can, the legal diploma and license are issued, and he is recognized as a doctor of medicine, entitled to all his privileges and immunities, and in the estimation of the law, as well qualified for the practice of his profession as if he were a graduate of Munich and a licentiate of Prussia. A candidate for the practice of the law must be certified to be of good moral character, and his learning ascertained and vouched for by three official judges; a minister must pass the examinations prescribed by his order; a mechanic must serve an apprenticeship, and at least know the names and uses of his tools; but the competency of a doctor of medicine is triumphantly evinced by the payment of ten dollars—a test of ability and learning which reflects infinite credit on the ingenuity and wisdom of our legislature. It is true, however, that the law, with commendable regard for the public weal, wisely requires him to keep pace with the progress of science, and restrains all delinquency by imposing an annual examination by the sheriff, and the issue of a new diploma from that worthy functionary.

For the exposé of medical education in Europe which I have presented, I am mainly indebted to the exceedingly able and elaborate report of Dr. F. Campbell Stewart of New York to the American Medical Association of 1849—a report which, together with that of Dr. Haxall in 1847 and of Dr. W. Hooker in 1851, I would commend to the careful perusal of every member of this society who desires to compare the systems of European and American medical education and requirement. Nothing, certainly, will be developed by that comparison calculated to flatter our national vanity or authorize the assumption that all other nations of the earth are mere outside barbarians. Truth to say, we are too much disposed to imitate the Chinese in this respect. But “let that pass.” When we compare our aggregate attendance of eight months

in the colleges with their several years, our period of private study with theirs, our six or seven professors with their scores, our curriculum with theirs, our single examination, which does not even disclose our ignorance of the boiling and freezing points of water, with the number they institute, of the severity of either of which the limits of this address would not allow me to present the least idea, we are driven to the conclusion that we have a great work to perform before we can claim that scientific position among the nations of the earth to which the intellectual powers conferred on us by the great Author of our being permit us to aspire. But, gentlemen, an honest contemplation of facts, as they really exist, should not exert even a depressing influence, but should only stimulate us to the exertion necessary to elevate our standard of professional acquirement. "The fault is in ourselves, not in our stars, that we are underlings." Let us address ourselves to the work with energy and perseverance, until the physicians of this country, individually and in the aggregate, shall proudly take rank with their brethren of other lands, whom the world has so long been accustomed to regard with veneration for their learning and gratitude for the practical blessings they have conferred on mankind. Let us contribute our share of influence and effort to those now in progress throughout the length and breadth of the land we live in, and success, tardy though it be, will at last be ours, and the public and the profession will alike recognize our purity of motive and the value of our achievement. I am no deteriorationist. However I may lament the defects of our system of medical education, I by no means wish to contend that we have made no progress—that medicine is not better taught now than it was in the days of Morgan and Kuhn and Shippen.

I love to look back through the vista of bygone years upon the past, and to yield to the professional worthies who originated medical instruction in this country the homage of my veneration and my gratitude. But in rendering to them this their merited tribute, I would not brighten the halo of their glory with a single ray abstracted from the distinguished



teachers of the present day, nor wither one leaf of the civic wreath which encircles their brows. Nobly have they won their honors—long and richly may they wear them. I know many of them personally and well; I know their ability, their honesty and their zeal; I know their love for their profession and their anxiety to advance its honor, its fame and its utility. Let it be ours to investigate, and so far as we can, to remove, the counteracting influences which now impede their efforts, and relieve them from the false position which the sordid motives of others compel them reluctantly to retain. The proposition, then, which I assert is, not that medicine in the best schools is now more imperfectly taught than formerly, but that its advance is controlled by circumstances which, if not vanquished, must lead to its decadence as a science and deprive it of the respect and consideration to which it is legitimately entitled. One of these circumstances, in the opinion of many of the most disinterested and accurate observers, is the unnecessary multiplication of schools authorized to grant the degree of M. D.; a degree which confers an equal rank, and is equally a passport to public consideration, whether issued by the most obscure or the most accomplished and eminent teachers in the land. Competition is said to be the life of trade, and so to a certain extent it doubtless is; and the remark is equally true applied to almost every other object of human avocation as it is to merchandize. Even in the learned professions, a certain amount of competition tends merely to excite salutary emulation, and conduces as well to the benefit of the public as to the improvement of the individuals immediately interested. But so soon as the supply exceeds the demand, the article manufactured or vended deteriorates in quality, that it may be afforded to the purchaser at a smaller price, and not only afford the usual profit, but enable the vender to attract the customers of his competitor, who is thus compelled to resort to similar expedients. Then succeeds a system of puffing and underbidding, and the adoption of every other disreputable artifice. The number of competitors increasing, new purchasers are induced, by the apparently

decreased price, which is in truth owing to the worthless character of the article, until finally the suffering public detects the fraud, the trade is ruined, and its prosecutors consigned to merited disgrace.

At no very distant period of the past there were only some two or three medical schools in the United States. The success of these excited the ambition and cupidity of individuals in every section of the Union, and we now have about forty authorized by chartered rights to confer the diploma. Among those of comparatively recent origin are many who number among their professors the jewels of our vocation, who, fully competent to teach thoroughly its various branches, would, if they were permitted to obey their own impulses, acknowledge as their alumni none but the worthy and well informed; and I may be allowed to say, without suspicion of sectional feeling or a disposition to institute invidious comparison, that many of these examples may be found in our own South. There are also many of the same character in the Northern, Eastern and Western states, but it is painful to remark, that among the forty schools there are many which are mere trading concerns, established from sordid motive, and continued without those lofty aspirations for reputation and usefulness which make "ambition virtue." But though powerless for good, such institutions are potent for mischief. Pupils must be obtained, and every inducement is offered, not only to those who are already engaged in the study of medicine, but to others who have not selected their vocation, to buy their tickets, with at least a tacit assurance that the degree shall be granted with the least possible expenditure of time, money or intellect. Fees are cheapened, terms of study are abbreviated, examinations reduced, until the Doctor Last of the great English comedian is no longer a fictitious character, and the perfection of machinery for all other manufactures must yield, in celerity of execution and certainty of effect, to that patented for the making of doctors. The youth in search of some employment by which he may obtain a support, is made aware of this; agriculture and merchandize require capital, the mechanical

arts a long apprenticeship and subsequent physical labor ; everybody cannot obtain office, and the learned professions are, in the opinion of the public, easily attained, not at all laborious in practice, and withal highly respectable ; but the ministry in most denominations demands a classical education, and moreover don't pay ; law requires some talent for public speaking, and ignorance is thus certainly detected ; but physic presents none of these difficulties ; anybody can make a doctor ; the portals of the colleges stand open and offer to complete the work for a small consideration ; submission to the prejudices and exactions of the great and little vulgar, and cheap charges, will ensure patronage even in competition with the most learned and skillful opponent, and there can therefore be no hesitation as to the selection of his *trade*. He determines to be a doctor, and so in a short time he is, sure enough. There was a time when some little talent and attainment were considered necessary for high political office or a position in either of the learned professions, but now "*nous avons changé tout cela*," and the apprehension may reasonably be entertained, that without a united and vigorous effort to sustain its ancient glory, medicine, like the lost pleiad, will disappear from the brilliant constellation of sciences, which has for so many centuries challenged the respect, the confidence, and the admiration of mankind.

The necessary result of all this is a too crowded profession. About 1600 pupils are annually converted into graduates by the aggregate will of the different colleges of the Union, and it is a deplorable truth that many inherit from their alma mater more of cunning and stratagem than of professional skill. The humiliating artifice which she employed to lure them into an occupation for which they were totally unprepared is transferred from the chair of the professor to the office of the practitioner, and the low arts of the demagogue, the self-laudation of the charlatan, and the secret arrangements of the hireling, are the filthy byeways to patronage which they tread, in preference to the broad and open highway of a noble and honorable profession.



Such, gentlemen, are some of the causes which have induced the apprehension among those who appreciate the value and would sustain the dignity of scientific medicine, that we are about to realize the "*facilis descensus averni*;" and it devolves on you, as influential constituents of the medical body politic of the United States, to suggest and to advance such measures as in your judgment may best tend to avert the catastrophe. The protection of the interests of the medical profession of the United States, the maintenance of its honor and respectability, the advancement of its knowledge and the extension of its usefulness, are the avowed objects of the American Medical Association. Its efforts to accomplish those objects are of necessity divided into the two classes of intrinsic and extrinsic action—the former including such proceedings as it may originate and complete within itself; the latter such as it may suggest and promote, but is impotent to complete, without the aid of the members of the profession residing in the various sections of the country. The condensed abstract which I have given of some of the labors of the association I have restricted to the latter class, because it is in reference to that class only that our aid is invoked.

In a country constituted like ours, without a central authority, either political or professional, it is manifest that all attempts to effect the purposes of the association must prove abortive, unless they are sustained by the government and the profession of the individual states. It is there that the diffusion of medical progress must receive its most effective impulse—there that the great battle of medical reform must be fought—there that future generations will recognize the Austerlitz or the Waterloo of American medicine. It is in the separate states that the medical profession, by zealous, dignified and disinterested effort, must enlighten public opinion, convince it of the personal interest which every individual of the commonwealth has in producing and fostering a corps of intelligent, well educated and moral medical men, and through its influence and with its sanction obtain from the legislatures such enactments as will exclude from the ranks of the regular

profession all except the worthy and properly qualified physician. There is, I know, in the human mind a natural tendency to be attracted by the marvellous and to be deceived by extravagant and delusive promises. It is on this principle that quackery operates and obtains from betrayed confidence its rich rewards. But all the immature and imperfect opinions of the masses on medical subjects are derived originally from physicians in whom they have great, though perhaps unacknowledged, confidence. In all their views we may perceive the *debris* of exploded theories and practice, their respect for medical men always inducing the adoption of their opinions on medical subjects when they believe them to be fairly and honestly expressed. Your influence, then, on public opinion on these topics is almost unlimited, and in this country public opinion is omnipotent. No law can be refused which it demands, and none can be executed of which it disapproves. See to it, then, that this most potent agent is not disregarded. I have a strong and abiding confidence in public sentiment when it is wisely instructed. It may for a time be deceived and misled, but it is equally its interest and its policy to arrive at just conclusions, and hence it is always accessible to the teachings of those in whose honor and intelligence it confides. Respect for you and for your opinions on subjects connected with your vocation induce it to adopt them; tardily, it may be, but all experience and observation prove that it will be guided by your convictions. I desire to impress this object forcibly on your attention, and to invoke for it all your influence. It is the first outwork to be conquered, and the first and greatest victory to be won. Without it, nothing can be accomplished—with it, everything. Essential, however, as public esteem undoubtedly is to all efforts at medical reform, it cannot be long retained, unless some means can be devised to prevent the ingress of the uneducated and the unworthy. As certainly as the whole is formed by a combination of parts, so certainly will the profession of medicine in the aggregate be estimated by the intellectual character of its individual members. The public ever has and ever will judge the claims of

medicine to respect and consideration by the abilities of those who practise it. They are certified by the recognized authority to be fully instructed in the science and art of medicine, and the public naturally infer that all the defects are defects of the science and not of the individual. Every physician, therefore, has a direct personal interest in the professional proficiency of his colleagues—for in that his own reputation is, to a great extent, involved. The character of medicine as a science is placed in the keeping of those who possess the diploma; and those who confer it are equally responsible to the public, to the profession and to the science itself, for the faithful exercise of the trust. Influences, however, are at work, as we have shewn, which, practically superior to all other considerations, induce many who would do good to do it not, and the evil they would not, that they do. So apparent was this fact, that one of the first efforts of the American Medical Association was to exclude the uneducated from the honors of the doctorate by an attempt to elevate the standard of medical education.

It was conceded \**“that there is too much truth in the charge that almost every person who has gone through the course prescribed by the colleges is allowed to pass, and that thus the people are imposed on and the profession degraded ;”* and †*“unless some decided change in the policy of legislative bodies should be effected, or some measures should be instituted by the profession itself to guard the exercise of the power”* of granting degrees and licenses, *“that abuses would continue to exist ;”* but it was predicted that the profession, when organized, had ‡*“but to urge in the spirit of kindness, but with firm resolve, such changes in the existing plans of medical education, or in the modes of examination, as appear to be most imperatively demanded for the protection of the common interests and for the good of humanity, and the colleges which are dependent on the profession for favor and support would respond to the appeal.”* Relying on this reason-

\* Minority report on Bartle's resolution, p. 108.

† Majority                   “                   “                   “                   119.

‡                   “                   “                   “                   121.



able expectation, the appeal was made, and the association, with all the moral power it possessed, urged upon the schools to lengthen their terms of study from four to six months, slightly to increase the number of their teachers, and to introduce alterations in the examinations of candidates for the degree. But, unfortunately, the result has not vindicated the sagacity of the prediction. The suggestions were partially adopted by some of the best institutions of the country, but by the large majority they were totally repudiated. Experience has demonstrated that unanimity was essential to the success of the effort, and those who adopted the plan, after a magnanimous struggle with the disastrous effects on their prosperity, have been reluctantly compelled to abandon the high position they had assumed. Even before the organization of the association, we are informed by Professor Joseph A. Eve, the faculty and trustees of the Medical College of Georgia, deploring the defectiveness of the system of medical education in the colleges of the United States, earnestly endeavored to correct it. They recognized the shortness of the term as an important defect, and trusting that the advantages of a prolonged term would be appreciated and acknowledged by physicians and students, they increased it to six months, and persevered in the effort for five successive years. They had the mortification to lecture to seats almost vacant, and to behold medical students hastening in crowds to fill the halls of four months colleges. They were compelled to recede and adopt the four months term, after which their classes increased rapidly—far beyond the expectations of their most sanguine friends. And thus it will ever be; no matter how desirous some schools may be to effect the desired reformation—they cannot succeed unless sustained by the unanimous action of the privileged institutions. It is not to be anticipated that this will ever be attained—and if it were, such is the facility for obtaining charters, that other aspirants would avail themselves of the illegitimate advantage, and establish new schools of lower grade, which would monopolize patronage. Let us not, then, censure the schools for failing to do that which is mani-

festly impracticable. So long as the diploma is the only passport to public confidence, and is therefore virtually the license to practise, so long will the diploma be the great object of the aspirations of the student; and if it be equally valuable from one source as from another it will ever be sought where it can be most easily and most cheaply obtained.

The license to practise is not, however, the inherent property of the diploma; and the only mode of abating the nuisance is, to adopt some plan which, while it recognizes it as an academic honor, will deprive it of the licensing power. The power to grant the license to practise should be confided to a board of examination, appointed by the authority of the state, competent to ascertain the qualifications of candidates, but totally unconnected with any school of medicine. The diploma should be required as evidence that the applicant had received a medical education and had passed an examination satisfactory to the constituted authorities of his college. The reputation and prosperity of a school would then depend on the proficiency of its pupils, not on the size of its classes or the number of its graduates. The quality and not the quantity of its work would be the measure of its worth. A fair and honorable competition would thus be created among medical institutions. They would graduate only those who were really fully instructed, because that institution, whose pupils were frequently rejected for incompetency by the examining board, would be deserted in favor of those whose teachings were more perfect. The various expedients now employed to obtain notoriety would be of no avail, because the merits or demerits of every college would be disclosed by the acquirements of its pupils; and by this test it would obtain an enviable celebrity or fall into merited disrepute. The certificate of qualification would be of no practical value, unless ratified by the licensing board; and the inducement to grant it unworthily would not only be annulled but it would be withheld, because every untrue certificate would be positively injurious to the reputation of the institution from which it emanated. As the diploma, moreover, would be of

no value to the student unless deservedly conferred, it would be earnestly sought as the necessary prelude to the ulterior object of his ambition—the license to practise; and the same motive would induce him to matriculate in that school which would offer him the fullest instruction, not the easiest access to the degree of M. D. An examining board, therefore, which demanded the diploma, would exert a salutary influence on the schools as well as on the pupils.

But there are other considerations which should restrain all action which would depreciate the value of the diploma, or lessen the respect to which it is entitled when restricted to its legitimate sphere. It is the ancient and honorable certificate of high professional attainment: such is its design, and as such it is estimated by the most enlightened nations of the earth. To destroy its reputation and its influence, because circumstances have led to the abuse of the trust reposed in those who are authorized to confer it, would be both unwise and unjust. Let us rather seek to neutralize the effect of those circumstances, and to restore it to the proud position it once occupied. Most of us recollect the exultation with which we ourselves received it; and for myself I confess that I still regard it as an early friend, whom I would not willingly desert in his extremity.

The indispensable importance of well conducted medical schools cannot be contested, and unless the diploma is required for admission to a final examination for the license, candidates will present themselves who have never entered a college, and will probably pass, with far inferior qualifications than are now necessary. Nor do I perceive how we shall elevate the standard of medical education by withdrawing the licensing power from one body, and conferring it exclusively on another. One examination is admitted to be an imperfect test of qualification—it is indeed one of the most potent evils of which we complain; and if the diploma be dispensed with, we shall still have but one, and that one liable as now to malign influences, incident to any single examination, and too obvious to occupy the time which would be consumed in ad-



verting to them. Nor would the mischievous effect of repudiating the diploma cease here. The respect which is felt for it by the public will be effaced, the restraints which it imposes will be destroyed, and a plan substituted which any legislature may repeal, and leave the community and the profession without the slightest protection from evils vastly greater than those we are now endeavoring to correct. Let us then, as far as our influence will sustain us, insist on both the diploma and a final examination by a board appointed by the state—let us be conservatives, not radicals—let us seek reform, not revolution; demanding the diploma as a *sine qua non* for the examination for license—not only demanding it as evidence of qualification, but consenting to its acceptance only from such schools as have a full curriculum and terms of study of sufficient duration to authorize the belief that it has been worthily obtained.

To render these views operative, we shall be told, legislative assistance must be invoked, and that the legislature will not respond to our appeal. I am aware of the difficulties which envelop this subject, of the clamor which will be raised by Thompsonians, and Homœopathists, Hydropathists and the host of other sutlers and followers of the camp; but if the representative be deaf to the voice of reason and of justice, let us appeal to the constituent. Let the public be enlightened on a subject of which, notwithstanding its intimate connection with the happiness of every individual in the community, it is now strangely ignorant, and conviction of its own interests in the cause will ensure our success. There is no subject on which popular views are so erroneous as on that of medicine. By a large portion of the populace it is regarded merely as a trade, and disease as a substance or essence to be cured by a specific, which by some witchery removes it. Even the better informed will assert that though surgery has improved medicine has not—that doctors differ in opinion on medical subjects, and that consequently there is no certainty in their views. It is in vain to reply that men will differ on all subjects where conclusions are to be inferred

from facts and circumstances—that law, theology, politics are liable to the same objection—that even the constitution of the United States—a written document that all profess to venerate—is variously understood, and that on their principles each of these would be denied their confidence. These are subjects on which difference may be tolerated, but medicine must be everything, or it is nothing. Like the usurper of the Scottish throne, it would “throw physic to the dogs,” because it cannot

“Minister to a mind diseased.

Pluck from the memory a rooted sorrow,  
Raze out the written troubles of the brain,  
And, with some sweet oblivious antidote,  
Cleanse the stuffed bosom of that perilous stuff  
Which weighs upon the heart.”

They would require it to perform functions reserved to Omnipotence itself, and if it fail in this, refuse it all credence, or degrade it to the art of the empiric and nostrum vender. To obtain the sympathy of the constituent, and the consequent assistance of the representative, reform must commence by instructing the public mind on the subject of medicine. Let it be taught what medicine really is, in simple, intelligible language. Be to it what a recent writer aptly terms a “rational doctor.” To accomplish this we may wisely take counsel of and profit by the example of our adversaries. Who will deny the influence which quackery and falsehood have exerted by means of the popular press—by almanacs, pamphlets, newspapers? If error can be successfully disseminated by such means, why is not the public mind equally accessible to truth and reason, and why may we not avail ourselves of means for laudable purposes, which have been prostituted to those which are mischievous and improper? Politicians propagate their tenets by public addresses—why may not we do likewise? Popular lectures on the principles of medicine, judiciously adapted to the peculiar capacities of the audience, would perhaps do more to revolutionize and establish public opinion than any other means that could be devised, excepting that most permanent and substantial basis for sound views on all

subjects—early education. If an elementary knowledge of anatomy and physiology were made a part of general education—if to a sufficient extent they were taught in our schools and colleges, so that our youth would bring with them into active life some acquaintance with the complicated and delicate structure of the human machine, and the laws which govern it—think you its management and repair would be confided to the unskilled and the ignorant, with less hesitation than if it were a watch or other implement of domestic utility? Gentlemen, I feel that I have too long trespassed on your attention, and can therefore merely suggest these topics for your grave consideration. I pray you to ponder them thoroughly, and then act according to the decisions of your judgment and your conscience.

But no matter how intelligent and successful the investigation of the causes which impede the progress of medicine—no matter how wise and judicious and well adapted the remedies suggested—no matter how distinguished or zealous or influential the individuals engaged in the movement—all will be unavailing so long as our efforts are isolated and unconnected. Concentrated, combined, harmonious, organized action, directed with energy, perseverance and zeal to meritorious objects, sanctioned and approved by all, and conducive to the best interests of the community as well as of ourselves, can alone be successful. The interests of the schools, the interests of the laity, the interests of the public are one and identical. Let there then be no divisions among us, but let us adopt a platform large enough and strong enough to satisfy and sustain us all. These are the elements of success, and these elements can only be combined in a comprehensive and well devised system of medical organization—an organization which shall include within its limits each insignificant part as well as the grand and influential whole. I congratulate you, gentlemen, on the prospect before us, of accomplishing this desirable object. The assemblage which I have now the honor to address is evidence that our noble old commonwealth



is neither insensible nor impassive. Our state society is already formed; let us cherish and sustain it, and enlarge its capacities, until it shall embrace every spot within the extensive limits of our territory. Then will every locality, incited and encouraged by your counsel and your example, have its own society auxiliary to this our central organization, exerting its wholesome influences on its immediate neighborhood, and contributing its quota to the promotion of the usefulness, honor and interests of the profession. Let not any one say that he is too old or too independent to aid in the great work we have to perform. Let him not fold his arms in apathy, because advancing age may prevent his participation in the blessings which an improved profession will diffuse. Had such motives prevailed with the fathers of our civil institutions, we had been now the serfs of a foreign monarchy. I will not believe that among the votaries of our benevolent and self-denying vocation there exists such absence of professional patriotism or such selfishness of feeling as would withhold effort to promote the happiness and welfare of those who will succeed us. Union is strength—and when we have our local societies, our state societies, and the great American Medical Association all fully organized, all actuated by the same magnanimous impulse, and all acting in united, harmonious concert, we shall present a phalanx of talent and power and influence irresistible and invincible. The temple of science and of truth, which our predecessors have been rearing for more than twice a thousand years, will advance towards its completion, aided by our labors, and embellished and adorned by the contributions of a people unborn and a country unknown when its corner stone was first laid on the solid foundation of nature and of nature's laws; and when the sun of medical improvement shall dispel the mists of ignorance and error, and shed its unclouded beams on our glorious edifice, exhibiting its spires and towers and buttresses in all their fair and just proportions, their beauty unmarred and their strength unimpaired by systems of false philosophy or the hostile assaults of arrogance

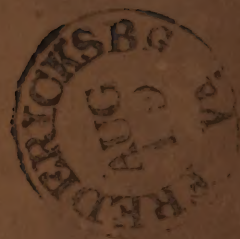
and folly, we may adopt the language of a *confrère*,\* distinguished alike for professional eminence and literary taste:

" See where aloft its hoary forehead rears  
The towering pride of twice a thousand years!  
Far, far below the vast incumbent pile  
Sleeps the gray rock from art's Ægean isle;  
Its massive courses, circling as they rise,  
Swell from the waves to mingle with the skies.  
There every quarry lends its marble spoil,  
And clustering ages blend their common toil:  
The Greek, the Roman, reared its ancient walls;  
The silent Arab arched its mystic halls;  
In that fair niche, by countless billows laved,  
Trace the deep lines that Sydenham engraved;  
On yon broad front that breasts the changing swell,  
Mark where the ponderous sledge of Hunter fell;  
By that square buttress look where Louis stands,  
The stone yet warm from his uplifted hands;  
And say, O Science, shall thy life blood freeze  
When fluttering folly flaps on walls like these?"

\* Dr. Oliver Wendel Holmes.







For Dr Grafton Tyler  
George Town  
B.C.